

---

# DHHS Immunization Program vaccine purchase data over 10 years

*Response to Social Services Appropriations  
Subcommittee request on 10/14/25*

Department of Health and Human Services Division  
of Population Health

January 22, 2026

---



---

# Motion:

Social Services Appropriations Subcommittee requests information on how much has been spent on each vaccine during the last 10 years from all funding sources and consider reallocation of the \$681,600 ongoing General Fund for the Immunization (State) program during the upcoming General Session.

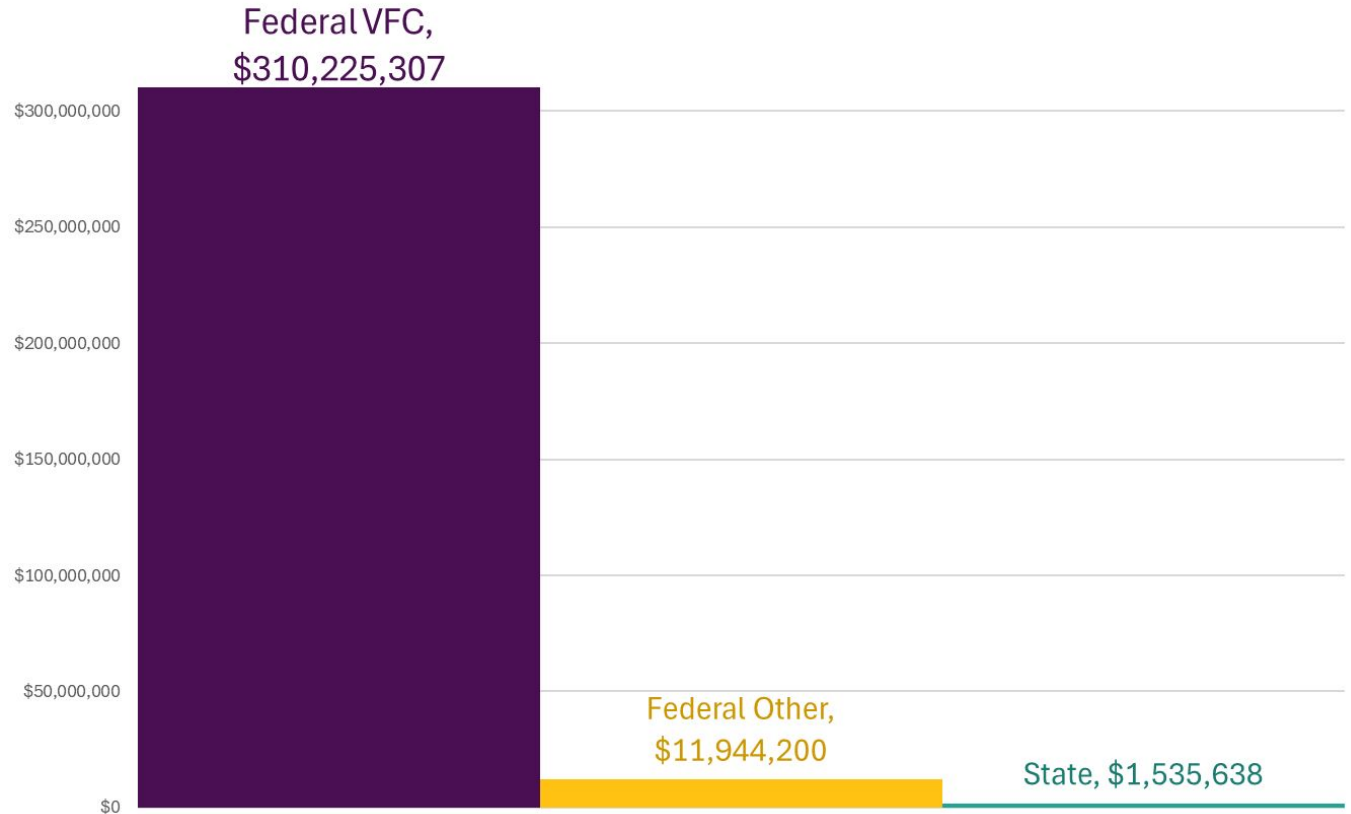
---

## Important points about this funding

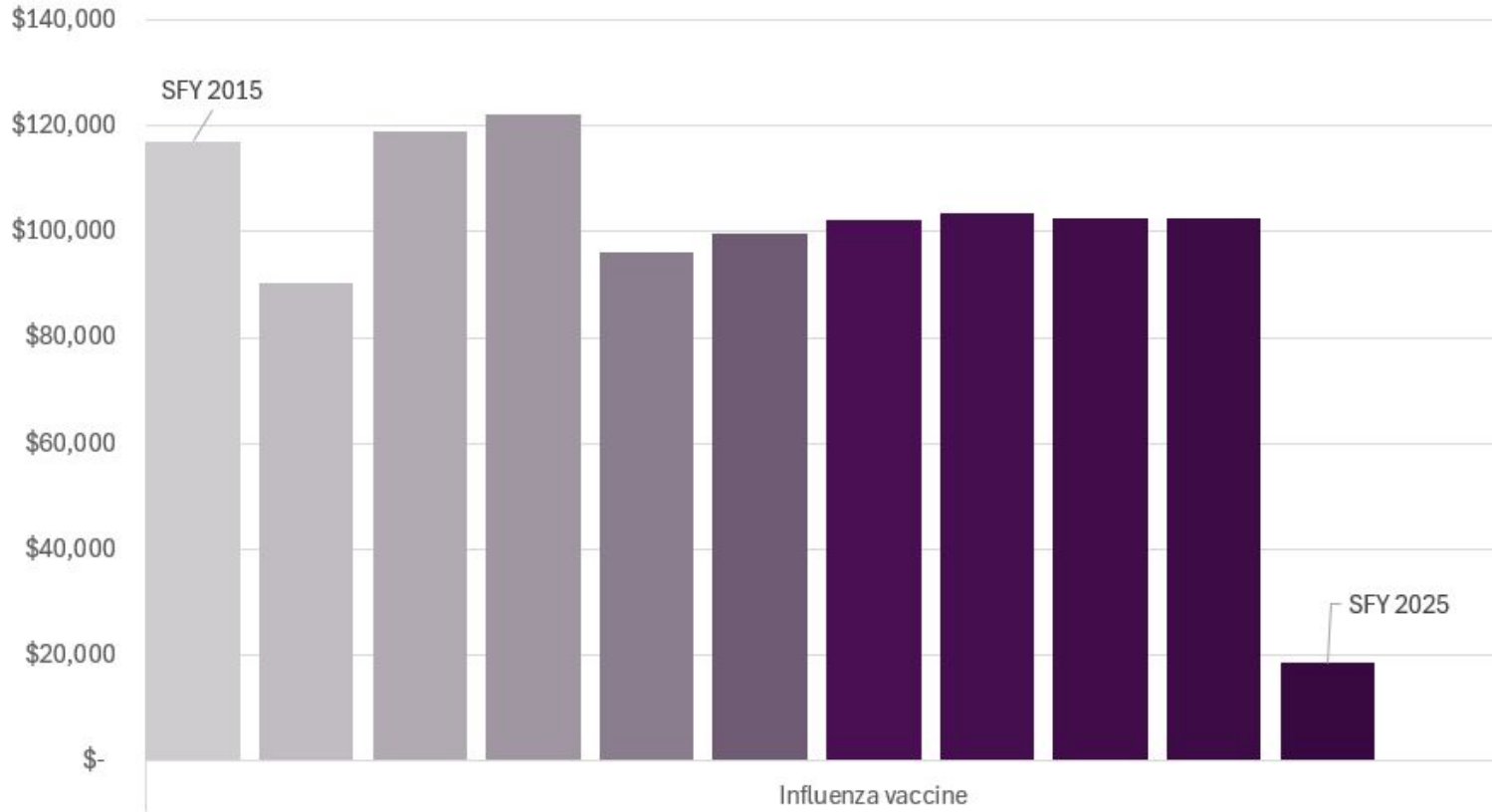


- Rapid response
  - Flexibility
  - Last resort funding
  - Supports critical vaccine efforts beyond purchases
-

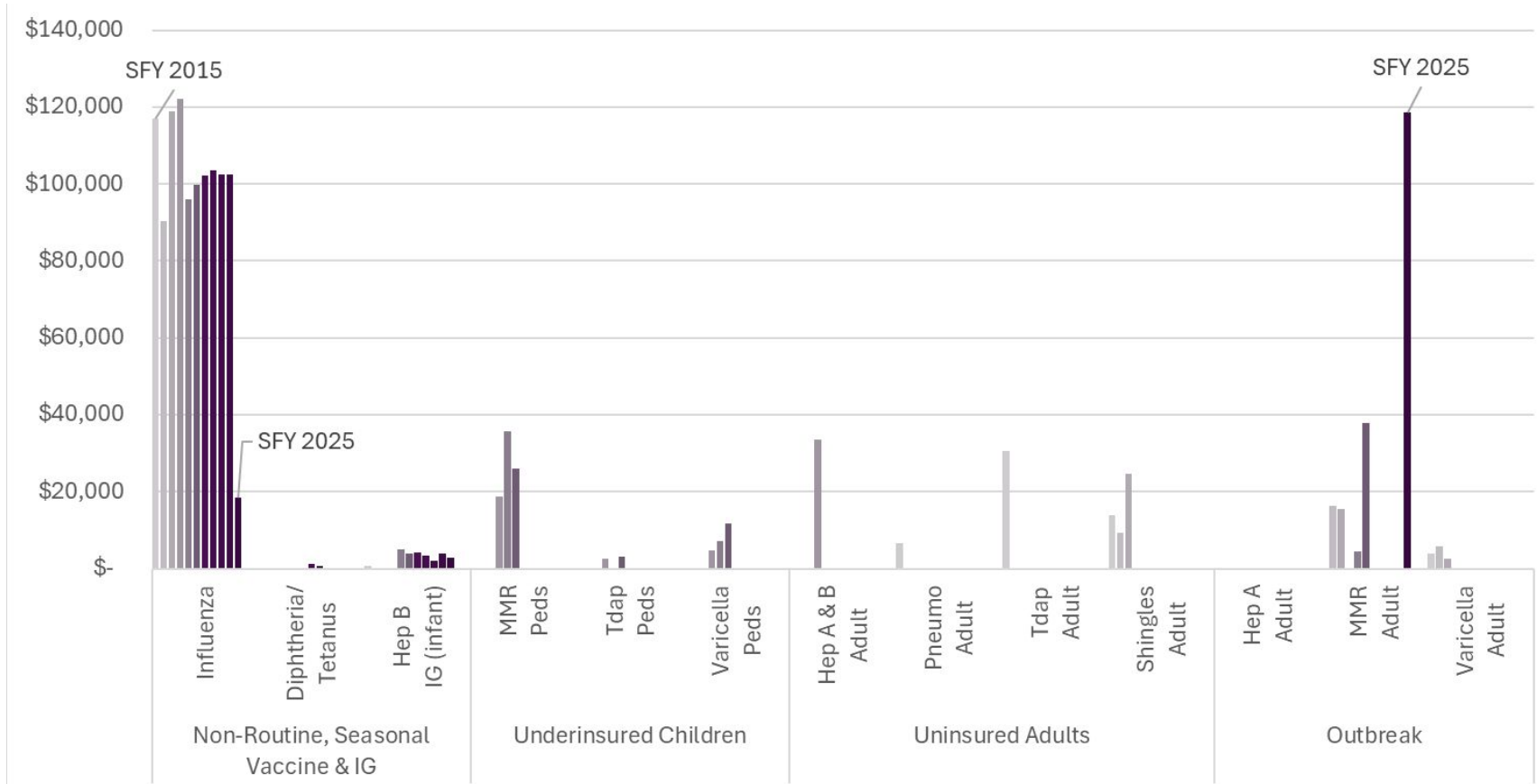
# State dollars were used to purchase 0.4% of vaccine in SFY 2015 through 2025



# State dollars spent on flu vaccine purchases, SFY 2015–2025



# State dollars spent on immunization purchases by vaccine type, SFY 2015–2025



## Significant value for state funding

**\$43,000**

Costs associated with treating 1 measles case

MMR vaccine: \$47 per dose

**\$542,000**

Average cost of treating 1 chronic Hep B infection

Hepatitis B immune globulin (HBIG) for pregnant mothers and infants: \$77 per dose

**540,000**

Records accessed by Utah residents in Docket app

---

# Epidemiology questions

*Response to Social Services Appropriations  
Subcommittee request on 10/14/25*

Department of Health and Human Services, Division  
of Population Health

January 22, 2026

---



---

# Motion:

Social Services Appropriations Subcommittee requests the Department present during the 2026 General Session on epidemiological connections to federal and international epidemiologist and their networks and report on what the total number of state and federally-funded epidemiologist FTEs study to determine what their overall impact to policy in our state is.

---

# Total number of epidemiologist FTEs in Utah's public health system, from all funding sources

Entity	# FTEs
DHHS	72.9
Utah's 13 local health departments	47.0
<b>TOTAL</b>	<b>119.9</b>

# EPIDEMIOLOGIST SKILLS AND RESPONSIBILITIES



01

**Collect and analyze  
information and  
trends**



02

**Investigate clusters  
of public health  
issues**



03

**Share information  
with stakeholders  
and public**



04

**Build and maintain  
data systems and  
data dashboards**

---

# Looking at disease differences across our state

Department of Health and Human Services, Division of Population Health

January 22, 2026

---



Utah Department of  
**Health & Human**  
Services

---

# Social Services Appropriations Request:

What specific communities and/or groups have poorer outcomes significantly different from the statewide average?

---

# Utah ranked 5th in the nation for health

Where we thrive:

- Healthy habits (drinking): fewer people engage in heavy or binge drinking compared to other states
- General physical health: low rate of people who have more than one chronic condition (like having both diabetes and heart disease)
- Safety: a low homicide rate

Areas for improvement:

- Substance use: even though alcohol use is low, non-medical drug use (like the misuse of prescription meds or illicit drugs) is high
- Doctor shortage: there aren't enough primary care doctors for the number of people in Utah
- Financial issues: a lot of adults skip doctor visits because they can't afford the bill

# Utahns also experience...

- Individuals with less than a high school education have twice the amount of diabetes as people with a college degree.
- More than twice as many Black/African American Utahns have diabetes compared with Utahns overall.
- People from rural areas are seen more often for asthma in emergency departments than those in urban areas, including the tricounty area and SE Utah.
- Rural males have the highest suicide rate in the state: For every 10 men who die by suicide in Utah's urban areas, roughly 14 men die by suicide in rural Utah.
- The percentage of Utah adults who smoke cigarettes is 20.2% for those on Medicaid compared to 5.5% for those not on Medicaid.

